

**Pacific Coast Oto-Ophthalmological Society.**—The Pacific Coast Oto-Ophthalmological Society held its twentieth annual meeting in Seattle June 30, July 1-2, 1932. This is a sectional society, embracing the territory west of the Rockies, British Columbia, Alaska, and Hawaii. Considering the times, the meeting was well attended, especially from near-by points. San Francisco was selected as the meeting place for 1933. The following officers were elected: President, Hans Barkan, M. D., San Francisco; first vice-president, Bertram C. Davies, M. D., Los Angeles; second vice-president, Lee Bouvy, M. D., LaGrande, Oregon; secretary-treasurer, J. Frank Friesen, M. D., Los Angeles.

**National Board of Medical Examiners—California Rankings.**—It is noted in the May number of *The Diplomat* published by the National Board of Medical Examiners that students of the College of Medical Evangelists took honors as follows in the February examinations: In Part I, Donald R. Gibbs made fourth place. In Part II, Robert B. Haining tied for first place, Eugene J. Joergenson tied for second place, John C. Redell took sixth place, and Elisabeth Larsson tied for tenth place. In Part I, Edward N. Lindquist tied for the highest mark in Bacteriology. In Part II, Elisabeth Larsson tied for highest mark in Medicine, and Joseph E. Cairncross tied for the highest score in Surgery. These examinations are written by students from all over the United States. The students securing the ten highest places constitute the "honor" list.

**American Public Health Association.**—The sixty-first annual meeting of the American Public Health Association will be held in Washington, D. C., October 24-27, with headquarters at the Willard Hotel.

The American Public Health Association occupies a unique place in the public health world. It is the corporate body of all the public health workers of the country. It is their organization, their clearing house, their source of information, their spokesman and advocate of sound working principles and standards in public health service, their avenue of personal contacts so essential to individual growth and advancement, and their inspiration to keep going. The association represents the public health workers of the country and through them the trend, the quality and the progress of the health of the nation.

The Association of School Physicians will hold its meetings on Friday, Saturday, and Sunday prior to October 24. This association will also meet in joint session with the Child Hygiene and Public Health Nursing sections for one or more programs. The State Sanitary Engineers will meet on Friday, Saturday and Monday for their own conferences and then join with the Public Health Engineering Section of the association.

The scientific character of the program is so well known that it does not need special comment here. One session will be devoted to the important subject of mental hygiene. The Committee on Training and Personnel will sponsor a luncheon at which the training of engineers, nurses, and health officers will be discussed. Diphtheria will be discussed at another luncheon. There will be symposiums on air hygiene; incidence, identification and significance of bacterial carriers; standard methods; bacterial dissociation; vital statistics; registration problems; and the participation of the medical profession in public health work. Altogether the scientific program promises to be unusually good.

Public health workers are urged to make their hotel reservations early so that they will be assured of adequate accommodations.

## HOSPITAL COSTS STAGGER NATION\*

*Bill for War Veterans to Reach \$55,329,525*

*Treatment for Disabled in Conflict Not Begrudged*

By COL. CHARLES R. STARK, JR.

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Washington, Aug. 21. (Exclusive)—Free hospitalization, domiciliary care and medical treatment of veterans of the Spanish and World wars will cost the United States Government \$55,329,525 this fiscal year. That is, it will cost that amount if Congress does not eliminate some of the items that have been proposed.

Nobody begrudges a dollar of this amount that will be spent for the care of men disabled as a result of war wounds or illness. There are many of the men, some of them pitiful remnants of strapping youths who went into the trenches prepared to give their all, doomed to live out the rest of their lives in hospitals. They were brought back from Europe on hospital ships, helpless on stretchers or in wheel chairs, and they have remained tied to beds or the same chairs ever since.

### Demand Good Care

These men gave without question and the people of the United States demand in no uncertain terms that they shall be well cared for as long as they live.

But their care does not take \$55,329,525 nor the major portion of that amount. On June 7, 1924, the law was changed so that any veteran of any war can turn to the government for hospital care and treatment for any injury or any disease even though the condition requiring hospital care did not arise from or have even a presumed connection with war service.

As a result of this change in the law 76 per cent of the total admissions to government hospitals in the fiscal year 1931 were for the admission of nonservice-connected cases, and the percentage is steadily rising each year. It is estimated that \$39,000,000 of the amount asked for this year is for the treatment of just such cases. Some of the men are Spanish War veterans, but the vast majority are World War ex-soldiers.

### Travel Pay

Take a look at what the government provides out of this \$39,000,000.

By far the greater number of veterans seeking hospitalization live in places away from the locations of the hospitals. The travel expense of the veteran asking treatment is paid to and from the place where medical examinations are conducted to determine their degree of disability and need of treatment.

A further travel expense is allowed to and from the hospitals if it is determined that they are in need of hospital care. They are cared for at the hospital, operated upon if necessary, clothed and fed while there, examined by specialists who are paid a fee if they are not on the regular pay roll, and buried if they do not recover.

In addition, other examinations are allowed if necessary and out-patient treatment given after they can be discharged if they are not fully recovered. Furthermore, in the discretion of the administrator, they are allowed a per diem of \$2.65 above travel and other expenses while traveling and under observation.

### No Question of Pay

There is not a word in the Act anywhere that limits these facilities to veterans unable to pay their own way at a private hospital. There is not a word in the Act that provides these facilities only after municipal, county or state facilities are determined to be so crowded the veteran cannot be treated there.

Originally the bill passed when the peak of treatment of war cases was over and there were many

\* Editor's Note.—For further discussion of hospital costs, see pages 199 and 204 of this issue of California and Western Medicine.

vacant beds in government hospitals. The bill permitted treatment "where existing facilities permit" and it was left to the discretion of the administrator to determine this fact.

Later it was changed so that any veteran could demand as his right such treatment. This meant more hospitals and more beds until General Hines, in charge of government pension affairs, estimates that eventually it will demand the adding of 100,000 additional beds at an estimated cost of \$140,000,000 a year.

#### League Opposed

The National Economy League, composed almost entirely of ex-service men who fought in France, declares that it cannot see the slightest justification for the hospitalization of veterans whose disabilities were incurred in civil life and have nothing to do with war service.

It says it calls for a vast expense entailing a heavy burden of taxation on the people and seeks not only the elimination of \$39,000,000 from this item of the proposed bill, but also the repeal of the Act that permits such free treatment.

And how this Act is abused! Walter Reed Hospital in Washington, D. C., is the largest of the army general hospitals and has a list of specialists in different lines. Its records will disclose case after case of men, amply able to pay their own way in a private institution, who have been operated on for serious diseases at government expense.

Incidentally, in this connection, members of Congress take advantage of the same legalized abuse and use that institution themselves.—Los Angeles Times.

## TWENTY-FIVE YEARS AGO\*

### EXCERPTS FROM OUR STATE MEDICAL JOURNAL

Vol. V, No. 9, September, 1907

*From some editorial notes:*

**Aid Our Friends.**—It is of advantage to readers of a publication to place before them advertisements of good articles and new things as they come on the market. There is no reason why a medical journal should not extend the same privilege to its readers and let them see what manufacturers have to say in their own behalf about their goods, so long as the goods are honest and the statements are kept within the range of probability. For these reasons, and for others, the journal has always opposed the argument that there should be no advertising pages in a scientific or medical journal. And, furthermore, the addition of advertising pages and the receipt of the revenue derived from them, permit of extending the size of the journal, improving the quality of its general make-up, etc. But the manufacturer is in the business to sell goods; he puts his advertisement in your journal with the hope that you will read it, be interested in what he says of his goods, and at least try them. He pays money to your state society for that purpose and so shows his faith in the journal of the society and in the interest of its members. We think he is amply justified, but we ask your further and continued interest and support. Do not hesitate to send for information, catalogs, samples, etc., pertaining to anything in which you may be interested. . . .

**Frightful Condition.**—The condition of things in the county health institutions of the greatest city on the Pacific Coast, as indicated in the report which the journal gladly publishes elsewhere in this issue, can only be regarded as frightful. The City and County Hospital would be a disgrace to medieval times; for years it has been such a menace to the lives of those who live in it that very many graduates have refused

to accept its internships, and more than one case of death from tuberculosis has been practically traced to the thoroughly infected and infested "hospital." Just think of the menace to those who are sick or injured and must of necessity seek aid in such a filthy institution! At the present time this, the City and County Hospital of San Francisco, is the worst focus of bubonic plague in the city! . . .

**Illegal Practitioners.**—We publish this month the first report from the committee of the Board of Examiners having in charge that portion of the new law which requires the board to prosecute violations of the statute. It must be understood that it is one thing to require certain things to be done and quite a different thing to do them—especially when no machinery is provided. We understand that there is practically no money available for this part of the work of the board, and without money but little can be done. Detectives must be employed to get evidence and attorneys must be hired to conduct the prosecutions; all of which necessitates the expenditure of money. . . .

**Pure Food Commission.**—Again the journal calls your attention to the work and the suggestions of the Pure Food Commission of the state society. . . . In Pasadena and Los Angeles a decided improvement in the milk supply and the condition of some dairies is reported, and in Fresno, where the local board has been active for several years, conditions are said to be very much above the average. . . .

*From an article on "Theophyllin as a Diuretic" by Albion Walter Hewlett, M. D., San Francisco.*

Theophyllin is beyond doubt the most remarkable diuretic that we possess today. Though the drug occurs naturally in tea in small amounts, its wide medicinal use has only been made possible by its synthetic preparation. This synthetic product is placed on the market under the trade name of theocin.

*From an article on "The Physiology of Glycosuria" by Martin H. Fischer, M. D., Oakland.*

The presence of dextrose in the urine is so greatly the predominating sign of a diabetes mellitus that a brief study of the physiology of glycosuria may well be regarded as a prerequisite to an intelligent understanding of the disease itself. . . .

## CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

By GILES S. PORTER, M. D.

Director

**Ban Placed on Clams as Well as Mussels.**—Laboratory examinations made under the direction of Dr. Karl F. Meyer of the Hooper Foundation for Medical Research, acting in cooperation with the California Department of Public Health, show that all clams (with the exception of mudclams) as well as mussels from certain sections along the coast of California are now poisonous. A quarantine has therefore been established by which the sale or offering for sale of all clams, with the exception of mudclams, is prohibited in the coastal area from Monterey County to the Klamath River in Del Norte County, excluding the bay of San Francisco. This quarantine will be in force until September 30, 1932. A similar quarantine was placed upon mussels May 28 to continue until September 30, also. Mussels and clams in the San Francisco Bay waters do not show signs of toxicity, as do these shellfish in ocean waters. For this reason, San Francisco Bay shellfish are not included in this quarantine order.

This does not affect, however, a permanent quarantine on clams in San Francisco Bay which was established by the California Board of Public Health May 28 because of sewage pollution of San Francisco Bay

\* This column strives to mirror the work and aims of colleagues who bore the brunt of state society work some twenty-five years ago. It is hoped that such presentation will be of interest to both old and recent members.